

FEC
FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

14 MAY -7 PM 2:12

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Dr. Monica Wehby for U.S. Senate

ADDRESS (number and street)

PO Box 3375



Check if different
than previously
reported. (ACC)

Portland

OR

97208

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00550996

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

OR

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)

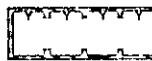


Convention (12C)



Special (12S)

Election on



in the
State of



(c) 30-Day POST-Election Report for the:



General (30G)

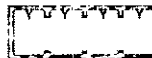


Runoff (30R)



Special (30S)

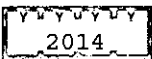
Election on



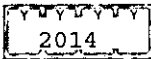
in the
State of



5. Covering Period



through

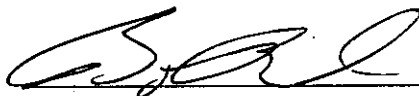


To redesignate contributions between Primary and General Elections.

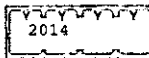
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bryan Burch

Signature of Treasurer



Date



NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)